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## APPLICANTS

Hans-Ulrich Demuth, Halle, GERMANY;  
 Jörn Schmidt, Wendel, GERMANY;  
 Torsten Hoffmann, Halle, GERMANY;  
 Konrad Glund, Halle, GERMANY;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\*\*\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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OK

Applicant will send a 312  
 amendment to correct  
 the confirmation data

IF REQUIRED, FOREIGN FILING LICENSE  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 8	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Examiner's Signature <i>CK</i> Initials <i>CK</i>				

## ADDRESS

Mark A. Hofer  
 Brown Rudnick Freed & Gesmer  
 One Financial Center  
 Boston, MA 02111

## TITLE

Compounds of unstable DP IV-inhibitors

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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